

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Serve America PAC

ADDRESS (number and street)

PO Box 2013

Check if different  
than previously  
reported. (ACC)

Salem

MA

01970

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00571174

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☒ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2016

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Tattrie, Darryl, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Tattrie, Darryl, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 15 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Serve America PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07		01		2016

To:

M M	/	D D	/	Y Y Y Y Y Y
09		30		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																		
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="6">2016</td></tr></table>	Y	Y	Y	Y	Y	Y	2016							<table><tr><td colspan="6">55423.44</td></tr></table>	55423.44					
Y	Y	Y	Y	Y	Y															
2016																				
55423.44																				
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="6">55179.13</td></tr></table>	55179.13																		
55179.13																				
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="6">25350.00</td></tr></table>	25350.00						<table><tr><td colspan="6">38350.00</td></tr></table>	38350.00											
25350.00																				
38350.00																				
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="6">80529.13</td></tr></table>	80529.13						<table><tr><td colspan="6">93773.44</td></tr></table>	93773.44											
80529.13																				
93773.44																				
<hr/>																				
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="6">5815.71</td></tr></table>	5815.71						<table><tr><td colspan="6">19060.02</td></tr></table>	19060.02											
5815.71																				
19060.02																				
<hr/>																				
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="6">74713.42</td></tr></table>	74713.42						<table><tr><td colspan="6">74713.42</td></tr></table>	74713.42											
74713.42																				
74713.42																				
<hr/>																				
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="6">0.00</td></tr></table>	0.00																		
0.00																				
<hr/>																				
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="6">0.00</td></tr></table>	0.00																		
0.00																				



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**Serve America PAC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
07	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y Y Y
09	/	30	/	2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

15250.00

27950.00

(ii) Unitemized .....

100.00

400.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

15350.00

28350.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

10000.00

10000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

25350.00

38350.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c)) .....

25350.00

38350.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

25350.00

38350.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	815.71	2060.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	815.71	2060.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	12000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	5000.00	5000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5815.71	19060.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5815.71	19060.02

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	25350.00	38350.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	25350.00	38350.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	815.71	2060.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	815.71	2060.02

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 12

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Serve America PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Brain, Charles, , ,**

Mailing Address 1579 Forest Villa Ln

City  
McLean

State  
VA

Zip Code  
22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Capitol Hill Strategies, LLC

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

08 / 12 / 2016

**Transaction ID : 11ai-000018875**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Israel, Barbara, F., ,**

Mailing Address 21 E 79th St

City  
New York

State  
NY

Zip Code  
10075

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Barbara Israel Garden Antiques

Occupation (for Individual)  
Antiques Dealer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / 12 / 2016

**Transaction ID : 11ai-000018874**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Duncan, Paul, , ,**

Mailing Address 2219 McLean Ave

City  
Trophy Club

State  
TX

Zip Code  
76262

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BNSF Railway

Occupation (for Individual)  
AVP Capacity Planning

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

08 / 20 / 2016

**Transaction ID : 11ai-000019011**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

Earmarked through ACT Blue

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 12

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Serve America PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Israel, Thomas, , ,**

Mailing Address 21 E 79 St

City  
New York

State  
NY

Zip Code  
10075

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Ingleside Investors

Occupation (for Individual)  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

08 / 29 / 2016

**Transaction ID : 11ai-000019113**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Nelson, Paul, , ,**

Mailing Address 4 Tall Tree Way

City  
Georgetown

State  
MA

Zip Code  
01833

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 25 / 2016

**Transaction ID : 11ai-000019381**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Earmarked through ACT Blue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Noonan, Charlie, , ,**

Mailing Address 9 Howard St

City  
Newburyport

State  
MA

Zip Code  
01950

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Boston Color Graphics LLC

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 25 / 2016

**Transaction ID : 11ai-000019382**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Earmarked through ACT Blue

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5050.00

15250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 12

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Serve America PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. New Democrat Coalition PAC**

Mailing Address 700 13th St NW Ste 600

City  
Washington

State  
DC

Zip Code  
20005

FEC ID number of contributing  
federal political committee.

**C** C00409730

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**07** / **11** / **2016**

**Transaction ID : 11c-000018487**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Border Health Federal PAC**

Mailing Address 612 W Nolana Ste 340

City  
McAllen

State  
TX

Zip Code  
78504

FEC ID number of contributing  
federal political committee.

**C** C00415752

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**09** / **16** / **2016**

**Transaction ID : 11c-000019171**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

10000.00

**TOTAL** This Period (last page this line number only)..... ►

10000.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Serve America PAC**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo Bank, NA**

Mailing Address PO Box 63020

City  
San FranciscoState  
CAZip Code  
94163Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	1		2	0	1	6		

FEC Identification Number

**C****Transaction ID : 21b-03-00115**

Amount of Each Disbursement this Period

66.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CommonCentsConsulting, LLC**

Mailing Address 2910 E Gary Way

City  
PhoenixState  
AZZip Code  
85042Purpose of Disbursement  
Compliance & Accounting Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	3		2	0	1	6		

FEC Identification Number

**C****Transaction ID : 21b-03-00114**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Act Blue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	4		2	0	1	6		

FEC Identification Number

**C****Transaction ID : 21b-03-00118**

Amount of Each Disbursement this Period

1.98

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

568.45

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Serve America PAC**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo Bank, NA**

Mailing Address PO Box 63020

City  
San FranciscoState  
CAZip Code  
94163Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : 21b-03-00132**

Amount of Each Disbursement this Period

69.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Act Blue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : 21b-03-00127**

Amount of Each Disbursement this Period

106.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Act Blue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	8			2	0	1	6		

FEC Identification Number

**C****Transaction ID : 21b-03-00131**

Amount of Each Disbursement this Period

1.98

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

177.70

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Serve America PAC**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo Bank, NA**

Mailing Address PO Box 63020

City  
San FranciscoState  
CAZip Code  
94163Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	2			2	0	1	6		

FEC Identification Number

**C****Transaction ID : 21b-03-00140**

Amount of Each Disbursement this Period

67.58

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Act Blue Technical Services**

Mailing Address 366 Summer St

City  
SomervilleState  
MAZip Code  
02144Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : 21b-03-00138**

Amount of Each Disbursement this Period

1.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

69.56

815.71

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Serve America PAC**

Full Name (Last, First, Middle Initial)

**A. Takai Family Trust**

Mailing Address PO Box 2267

City  
Pearl CityState  
HIZip Code  
96782Purpose of Disbursement  
Donation

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : 29-03-00134-I**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

5000.00